## **Humana Critical Illness and Cancer**

#### **Texas**

#### Splendora Independent School District

Consider coverage that helps protect you, your family, and your assets in the event of a critical illness. It offers specialized benefits to supplement other health insurance when you and your family may be most vulnerable: during the working years. Benefit payments can assist in covering a variety of expenses associated with a critical illness: out-of-pocket medical care costs, home healthcare, travel to and from treatment facilities, rehabilitation, and other expenses.

Coverage type	Voluntary Critical Illness insurance is a group policy form that includes coverage for heart/stroke, cancer, and other critical illnesses.		
Benefit amount	<ul> <li>Benefit amounts are available at various levels. You can choose:</li> <li>\$5,000 to \$50,000 for employees</li> <li>You can also add coverage for your dependents:</li> <li>Spouse: \$2,500 to \$25,000. Spouse coverage benefit is equal to exactly half of the employee's coverage</li> <li>Child: \$2,500 to \$5,000 for each eligible child. Child coverage benefit is equal to exactly half of the employee's coverage to a maximum of \$5,000.</li> </ul>		
Coverage for vascular conditions	Percent of benefit amount paid at initial diagnosis:		
	Heart attack     100%		
	<ul> <li>Transplant as a result of heart failure</li> </ul>	100%	
	Stroke	100%	
	<ul> <li>Coronary artery bypass surgery as a result of coronary artery disease</li> </ul>	25%	
Coverage for cancer conditions	Percent of benefit amount paid at initial diagnosis:		
	First diagnosis of internal cancer or malignant melanoma	100%	
	Carcinoma in situ	25%	

This is not a complete disclosure of plan qualifications and limitations. Please access our website to obtain a completed list for the Workplace Voluntary Benefit products at Disclosure. Humana.com. Please review this information before applying for coverage. The amount of benefits provided depends on the plan selected. Premiums will vary according to the selection made. THIS POLICY PROVIDES LIMITED BENEFITS.

Policy: 8011

Underwritten by Kanawha Insurance Company, a Humana company.





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Coverage for other critical illnesses	Percent of benefit amount paid at initial diagnosis:			
	Transplant, other than heart			
	End-stage renal failure	100%		
	<ul> <li>Loss of sight, speech, or hearing</li> </ul>	100%		
	• Coma	100%		
	Severe burns	100%		
	<ul> <li>Permanent paralysis due to an accident</li> </ul>	100%		
	Occupational HIV	100%		
Additional included benefits	Waiver of premium for disability: This waives an employee's premium if he or she becomes totally disabled for at least 180 days after the effective date of coverage. For employees ages 18-55.			
	Benefit recurrence: This provides an additional benefit for the same condition if a covered participant is treatment-free for at least 6 months.			
	<ul> <li>□ Health screening: Benefit pays per calendar year for covered health screenings. There are 18 covered tests including mammograms, colonoscopies, and stress tests.</li> <li>• Indemnity based and payable once per calendar year per insured</li> <li>• Employer selects this optional benefit and the benefit amount; Employee may decline the benefit if he/she chooses</li> <li>• Coverage is same for all insureds on the certificate</li> <li>□ \$100</li> </ul>			
Portability	Portable after six months of continuous coverage if group master policy remains in force and the insured is less than age 70. Participants may continue coverage by paying premiums on a direct billing method.  • All ported certificates will be subject to any rate increases on the Employer's Master Policy.			
Pre-existing provision	Waived			

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Additional plan information

Spouse includes domestic partners where allowed by state and employer.

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### Humana Critical Illness and Cancer Rates

### Splendora Independent School District

### **Texas**

#### **Employee rates**

Displaying monthly payroll deductions based on monthly premium calculation including Benefit Recurrence and \$100 Health Screening benefit

Age		Employee - NTU	iployee - NTU		Employee - TU		
BENEFIT:	\$10,000	\$15,000	\$20,000	\$10,000	\$15,000	\$20,000	
18-29	\$6.78	\$8.86	\$10.94	\$8.87	\$12.00	\$15.12	
30-39	\$10.51	\$14.11	\$17.71	\$15.87	\$22.14	\$28.42	
40-49	\$18.02	\$25.06	\$32.10	\$31.23	\$44.87	\$58.51	
50-55	\$28.88	\$40.83	\$52.79	\$51.05	\$74.09	\$97.13	
56-59	\$28.88	\$40.83	\$52.79	\$51.05	\$74.09	\$97.13	
60-64	\$44.91	\$64.39	\$83.87	\$79.87	\$116.83	\$153.79	
65-69	\$52.56	\$75.84	\$99.13	\$92.32	\$135.48	\$178.64	

<sup>\*</sup>Children Rate included at 50% up to \$10K.

#### **Spouse Rates**

Displaying monthly payroll deductions based on monthly premium calculation including Benefit Recurrence and \$100 Health Screening benefit

Age	Spouse - NTU		Spouse - TU			
BENEFIT:	\$5,000	\$7,500	\$10,000	\$5,000	\$7,500	\$10,000
18-29	\$4.70	\$5.74	\$6.78	\$5.75	\$7.31	\$8.87
30-39	\$6.91	\$8.71	\$10.51	\$9.59	\$12.73	\$15.87
40-49	\$10.98	\$14.50	\$18.02	\$17.59	\$24.41	\$31.23
50-55	\$16.92	\$22.90	\$28.88	\$28.01	\$39.53	\$51.05
56-59	\$16.92	\$22.90	\$28.88	\$28.01	\$39.53	\$51.05
60-64	\$25.43	\$35.17	\$44.91	\$42.91	\$61.39	\$79.87
65-69	\$29.28	\$40.92	\$52.56	\$49.16	\$70.74	\$92.32

NTU: Non-tobacco user; TU: Tobacco user



